CURRITUCK COUNTY TAX DEPARTMENT PO BOX 9, CURRITUCK NC 27929

MOTORVEHICLE APPEAL FORM

Phone: (252) 232-3005 Fax to: (252) 232-3568

VEHICLES OWNER(S)			
MAILING ADDRESS:			
CITY	STATE	ZIP	
PHONE:	_ BILL #	ACCOUN	T #
FAX #	_ (If you wish to notifie	d by fax)	
VEHICLES APPEALS MU	JST BE FILED BEF	ORE TAXES BEC	OME PAST DUE
**********	***** VEHICLE INFOR	MATION *********	*******
YEAR MAKE	MODEL _	MILE	EAGE
VIN #	TAG #	# C`	YLINDERS
TRANSMISSION (Y/N)	AIR COND. (Y/N)	4WD (Y/N)	_# DOORS
PURCHASE PRICE	APPROXIMAT	E DATE OF PURCHA	\SE*
*ATTACH BIL	L OF SALE IF PURCH	HASE WAS LESS THA	AN 1 YEAR AGO
***********	** VALUATION INFOR	MATION *********	********
TAX ASSESSMENT \$	OWNERS OPI	NION OF RETAIL VA	LUE \$
BASIS FOR OPINION OF VAL	LUE ATTACH SUPP	ORTING DOCUMENT	TATION
SIGNATURE OF OWNER	***** NOTICE OF DEC	ISION **********	DATE
	NOTICE OF BEC		
IF YOU DO NOT AGREE WITH THI			
**************************************	^^ BELOW OFFICE US ⁻ ax adj. \$		